BEST AVAILABLE COPY

DATENT	ADDL	ICATION.	CEC DE	TERMINA	TION	DECODE
PAIFNI	APPL	ICATION	FEE DE	IERMINA	HUNI	RECURL

Effective October 1, 2001

Application or Docket Number

8-3

CLAIMS AS FILED (Column							SMALL ENTITY TYPE C		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS		18				RATE	FEE	1	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BASIC FEE		OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			\ { minus 20= *		*		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			→ minus 3 = *		*		X42=		OR	X84=	
ML	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				+140=		OR	+280=	
* If the difference in column 1 is			less than zero, enter "0" in co		olumn 2	TOTAL	··	OR	TOTAL	011	
	С	LAIMS AS A	MENDED - PART II				1			OTHER	
		(Column 1)	A constitution of the second control of the	(Colu		(Column 3)	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus	***	T CL AIM	=	X42=		OR	X84=	
L	ring i Friede	INTATION OF IM	JETIPLE DEF	LINDLIN	CLAIN		+140=		OR	+280=	
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	7.0511.122				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=	X\$ 9=	:	OR	X\$18=	
AME	Independent	*	Minus	***	E CL ADA	=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JUIPLE DEF	PENDEN	CLAIIVI		+140=		OR :	+280=	
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT: I EL		•	ADDII. I EE	·
ENT C		CLAIMS REMAINING AFTER AMENDMENT	in the	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL ALLA	=	X42=		OR	X84=	
Ľ	FIRST PRESE	ENTATION OF M	ULTIPLE DEF	ZENDEN.	I CLAIM		+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										